(FOR USE WITH FORM PTO-875) CLAIMS AS FILED AFTER AFTER	1	MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET									SERIAL NO. FILING DATE						
AS FILED CAPTER CAPACISMENT IND. DEP. IND. DEP			(FOR U	SE WITH	I FORM	PTO-875)		APPLICA	NT(S)	1.73		L				
AS FILED		, 		1 45	YEDD.			CLAIM	S								
TRUE DEP. IND. DEP.				I"AME	I AMENDMENT		2 AMENDMENT			AS FILED		AFTER CAMERDMENT		AFTER			
2 3 4 0 5 52 53 54 54 55 56 6 77 70 70 70 71 71 72 72 73 74 75 76 77 70 70 71 71 72 72 73 74 74 75 75 76 77 70 71 71 71 72 72 73 74 74 75 75 76 77 70 71 71 71 72 73 74 74 75 75 75 75 75 75 75 75 75 75 75 75 75	1	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.				_		
Solution				1			 	 -		 					-		
S									53								
6				 	 												
The state of the	6		(f)				-]-									
9 0 0 0 111 0 0 0 111 0 0 0 111 0 0 0 0									57								
10					1.(
111 0) 12 0 0 1 14 0 0 1 14 0 0 1 15 0 0 0 1 15 0 0 0 1 15 0 0 0 1 15 0 0 0 1 15 0 0 0 1 15 0 0 0 1 15 0 0 0 1 15 0 0 0 0			(3)					}									
13					丁丁				61								
14 0) 64 65 66 67 68 68 69 69 21 70 70 70 70 70 70 70 70 70 70 70 70 70																	
15 O O O O O O O O O O O O O O O O O O O	14		0)		7			· -									
17					Z				65								
18																	
19	18		0														
211									69								
22			M		7-1-					·							
24			0								· -						
25				\mathcal{A}													
26					7												
28									6				-	 -			
29					<u> </u>												
31	29		ñ										 				
32		<u> </u>	3-1	- 	\rightarrow												
33	32				+ +	- 											
35		C															
36 00 00 37 00 38 6 87 37 38 88 39 0 40 40 00 00 00 00 00 00 00 00 00 00 0			3-1-		} 		 										
37 38 39 40 40 41 42 43 43 44 45 46 47 48 48 49 50 50 50 50 50 50 50 50 50 50 50 50 50	36																
39			١٢														
40 (°) 41 42 91 92 93 44 94 95 96 97 98 99 950 99 90 90 90 90 90 90 90 90 90 90 90 90		-6	3	\nearrow									- -	- -			
42 43 44 44 45 46 47 48 49 50 50 50 50 50 50 50 50 50 50 50 50 50	40	0			7			90						二二			
43 44 45 45 46 47 48 49 50 50 50 50 50 50 50 50 50 50 50 50 50												- -	4				
45 46 47 48 49 50 50 50 50 TALIND TALIND TOTAL DEP TOTAL CLAIMS 95 97 100 TOTAL CLAIMS TOTAL CLAIMS	43						\exists										
46 47 96 97 97 48 98 99 99 100 100 100 100 100 100 100 100 1			- -				_										
47 48 49 50 50 TTAL IND TTAL DER TOTAL CLAIMS 97 100 TOTAL END TOTAL END TOTAL CLAIMS 97 100 TOTAL END TOTAL END TOTAL CLAIMS	46						\dashv						+	-	\dashv		
49 50 100 100 101AL IND. 101AL DEP			\Box					97					1		\Box		
TOTAL DEP TOTAL DEP TOTAL CLAPAS					 	 									-		
TTAL DEP TOTAL DEP TOTAL CLASS CONTROL CLASS			1		二二	二二	コ										
TOTAL CLARKS CARRES	TAL IND.	4	·	1 1	P			TOTAL	ND.	4		1		1	1		
		12300	_ _/	7	40000	42		<u> </u>						41			
				(U)									7.2		鑿		